PUBLIC HEALTH DEPARTMENT[641]

Adopted and Filed

Pursuant to the authority of Iowa Code section 147A.27, the Department of Public Health hereby amends Chapter 134, "Trauma Care Facility Categorization and Verification," Iowa Administrative Code.

The rules in Chapter 134 describe the process and standards for the categorization and verification of hospitals and emergency care facilities as trauma care facilities. These amendments amend the definition of emergency medical care provider by referencing the definition found in 641—131.1(147A). These amendments also update the reference to the "Iowa Trauma System Regional (Level II) Hospital and Emergency Care Facility Categorization Criteria"; the "Iowa Trauma System Area (Level III) Hospital and Emergency Care Facility Categorization Criteria"; and the "Iowa Trauma System Community (Level IV) Hospital and Emergency Care Facility Categorization Criteria" documents to the 2013 editions.

Notice of Intended Action was published in the May 29, 2013, Iowa Administrative Bulletin as **ARC 0772C**. No comments were received. The adopted amendments are identical to those published under Notice of Intended Action.

The State Board of Health adopted these amendments on September 11, 2013.

After analysis and review of this rule making, no impact on jobs has been found.

These amendments are intended to implement Iowa Code section 147A.23.

These amendments will become effective on January 6, 2014.

The following amendments are adopted.

ITEM 1. Amend rule **641—134.1(147A)**, definition of "Emergency medical care provider," as follows:

"Emergency medical care provider" means an individual who has been trained to provide emergency and nonemergency medical care at the first responder, EMT-basic, EMT-intermediate, EMT-paramedic, paramedic specialist or other certification levels recognized by the department before 1984 and who has been issued a certificate by the department emergency medical care provider as defined in 641—131.1(147A).

ITEM 2. Amend subrule 134.2(3) as follows:

134.2(3) Adoption by reference.

- a. "Resources for Optimal Care of the Injured Patient" (2006) published by the American College of Surgeons Committee on Trauma is incorporated and adopted by reference for Resource (Level I) hospital and emergency care facility categorization criteria. "Iowa Trauma System Regional (Level II) Hospital and Emergency Care Facility Categorization Criteria" (2006 2013) is incorporated and adopted by reference for Regional (Level II) Hospital and Emergency care facility categorization criteria. "Iowa Trauma System Area (Level III) Hospital and Emergency Care Facility Categorization Criteria" (2006 2013) is incorporated and adopted by reference for Area (Level III) hospital and emergency care facility categorization criteria. "Iowa Trauma System Community (Level IV) Hospital and Emergency Care Facility Categorization Criteria" (2010 2013) is incorporated and adopted by reference for Community (Level IV) hospital and emergency care categorization criteria. For any differences which may occur between the adopted references and these administrative rules, the administrative rules shall prevail.
- b. "Iowa Trauma System Regional (Level II) Hospital and Emergency Care Facility Categorization Criteria" (2006 2013), "Iowa Trauma System Area (Level III) Hospital and Emergency Care Facility Categorization Criteria" (2006 2013) and "Iowa Trauma System Community (Level IV) Hospital and Emergency Care Facility Categorization Criteria" (2010 2013) are available through the

Iowa Department of Public Health, Bureau of Emergency Medical Services EMS, Lucas State Office Building, Des Moines, Iowa 50319-0075, or the bureau of EMS Web site (www.idph.state.ia.us/ems).

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EDITOR'S NOTE: For replacement pages for IAC, see IAC Supplement 10/2/13.